

**BEST AVAILABLE COPY**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		10-14-99
O.I.P.E. CLASSIFIER		59158	10/21
FORMALITY REVIEW			11-1-99

**INDEX OF CLAIMS**

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
 staple additional sheet here

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